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STATE OF SOUTH DAKOTA

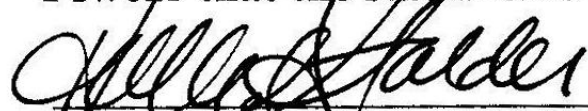
Statement of Legal Newspaper Ownership and Circulation


Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

| | | | |
|--|---|--|---|
| 1. TITLE OF NEWSPAPER Butte County Post | | 2. DATE 10/1/2009 | |
| 3. FREQUENCY OF ISSUE Weekly | 3A. NO. OF ISSUES PUBLISHED ANNUALLY 52 | 3B. ANNUAL SUBSCRIPTION PRICE \$ 36.00 | |
| 4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 614 State Street, Belle Fourche, Butte County, 57717 | | | |
| 5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 614 State Street, Belle Fourche, Butte County, 57717 | | | |
| 6. FULL NAME OF PUBLISHER: Hollie Stalder | | | |
| 7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) | | | |
| FULL NAME Lee Enterprises | | COMPLETE MAILING ADDRESS 201 N. Harrison Street STE 600, Davenport, IA 52801 | |
| 8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) Attached | | | |
| 9. EXTENT AND NATURE OF CIRCULATION | | AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS | ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE |
| A. TOTAL NO. COPIES (Net Press Run) | | 1981 | 1919 |
| B. PAID AND/OR REQUESTED CIRCULATION | | | |
| 1. Sales through dealers and carriers, street vendors and counter sales. | | 842 | 819 |
| 2. Mail Subscription (Paid and or requested) | | 836 | 824 |
| C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2) | | 1678 | 1643 |
| D. FREE DISTRIBUTION | | | |
| 1. BY MAIL, CARRIER OR OTHER MEANS | | 17 | 16 |
| 2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES | | 0 | 0 |
| E. TOTAL DISTRIBUTION (Sum of C, D1 and D2) | | 1695 | 1659 |
| F. COPIES NOT DISTRIBUTED | | | |
| 1. Office use, left over, unaccounted, spoiled after printing | | 286 | 260 |
| 2. Return from News Agents | | 0 | 0 |
| G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A) | | 1981 | 1919 |

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:


(Signature)


(Title)

State of South Dakota)

County of LAWRENCE)

(Seal)

Sworn to before me this 30th day of SEPT, 2009


Notary Public

My commission expires: 11-9-2012